

POWER PIPING / WELDED REFRIGERATION

PIPING INSTALLATION REGISTRATION

Safety & Buildings Division
 Inspection and Safety
 Support Section
 P O Box 7302
 Madison WI 53707-7302

Personal information you provide may be used for secondary purposes [Privacy Law s.15.04 (1)(m)].

Check type of system being installed: ☐ Power Piping ☐ Welded Refrigeration Piping

System Description: Include pipe sizes, total length of pipe welded and purpose of system (example: main steam, refrigerant etc.).

☐ New ☐ Replacement ☐ Modification

User or Owner's Name	Telephone #	Installing Contractor's Name	Telephone #
Street Address		Street Address	
City, State, Zip Code		City, State, Zip Code	
Installation Designed By		Certified Inspector Signature	
		Employed By	
In Accordance With Natl. Std.# <input type="checkbox"/> ANSI / ASME B 31.1 <input type="checkbox"/> ANSI / ASME B 31.5		Date Inspected	Cert. No.

Maximum Design Pressure of System

Leak Test Pressure Applied..... Refrigeration: *High Side* _____ *Low Side* _____ Steam Piping: _____

Test Type: ☐ Hydrostatic ☐ Pneumatic ☐ Other _____ **Date Tested**

I certify this system was installed and tested in accordance with Wisconsin Administrative Codes Chapter Comm. 41/45 as applicable

Date Installation Completed	Installer's Signature and Title	FOR COMMERCE USE ONLY Date Installation Registered
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Installer must prepare this document and maintain on job site until completion of fabrication.

Upon completion distribute as follows:

White – Send to Safety and Buildings Division (address above) **Yellow** – Send to Owner **Pink** – Retain for File
 SBD-5204-E (R.09-04) (End Date 09/07)